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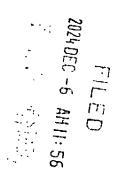
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COVER LETTER

COAST 2 COAST RE PROPERTIES LLC

TO: Registration Section **Division of Corporations**

SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Michelle Reagan	
		Name of Person	
	(Coast 2 Coast Notary Pros LLC	
		Firm/Company	
		2925 Meleto Blvd.	
		Address	
	N	lew Smyrna Beach FL 32168	
		City/State and Zip Code	
		chelle.reagan1973@yahoo.com	
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all;	
Mic	thelle Reagan	972 672-9244 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
inclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

	COAST 2 COAST RE PROPERT	TIES LL 2024 DEC -6 AH H: 55
(Name of the Lin	nited Liability Company as it now a (A Florida Limited Liability Comp	any)
The Articles of Organization for this Limited	Liability Company were filed o	nAUGUST 7, 2024 and assigned
Florida document numberL240003458	820	
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	of the limited liability compar	<u>w here:</u>
1	COAST 2 COAST NOTARY PRO	OS LLC
The new name must be distinguishable and contain the	words "Limited Liability Company."	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
(Principal office address MUST BE A STRE		
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on o	ur records, enter the name of the new regist
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on o	ur records, <u>enter the name</u> of the <u>new regist</u>
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on o	ur records, <u>enter the name of the new regist</u>
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on oress here: Michelle Reagan 2925 Meleto Blvd.	
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office address on oress here: Michelle Reagan 2925 Meleto Blvd.	ur records, <u>enter the name of the new regist</u> Florida street address
Name of New Registered Agent:	registered office address on oress here: Michelle Reagan 2925 Meleto Blvd.	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Michelle Reagan	2925 Meleto Blvd. New Smyrna Beach FL 32168	□ Add
			□Remove
			Change
MGR	Blake Reagan	2925 Meleto Blvd. New Smyrna Beach FL 32468	= Add
			□Remove
			□Change
	 		□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

	
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's rec-	prior to date of filing or more than 90 days after filing.) Pursuant to 605,020 pplicable statutory filing requirements, this date will not be listed as ords.
- I provide the track of the	
e record specifies a delayed effective date, but not an effecti rd is filed.	ive time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated December 4 2024	
michele	authorized representative of a member
Signaturyor a member or	aumorized representative of a member
	chelle Reagan printed name of signee